

Old Victorians' Association

established since 1941



LIFE MEMBERSHIP FORM

Please indicate if this is a NEW application OR UPDATE of particulars

| SECTION A: PERSONAL INFORMATION | | | |
|--|---|--|----------------------------|
| Please help us verify your identity | | | |
| 1) Name | Dr / Mr / Mdm / Miss | NRIC or Passport | |
| 2) Address | | Postal Code | |
| 3) Contact | Telephone | HP | E-mail |
| SECTION B: OTHER INFORMATION | | | |
| This will help us tailor our activities | | | |
| 4) Occupation/ Title/ Function | | Company | |
| 5) Academic/ Professional Qualification | <input type="checkbox"/> Secondary <input type="checkbox"/> Pre-U/ JC <input type="checkbox"/> Degree | <input type="checkbox"/> Post-Graduate <input type="checkbox"/> Others: _____ | Sports/ Hobbies/ Interests |
| 6) Any other information/ Remarks | | | |
| SECTION C: ACADEMIC INFORMATION | | | |
| Please help us verify your alumni status | | | |
| VICTORIA (PRIMARY) SCHOOL | | VICTORIA SCHOOL | |
| Year FROM _____ TO _____ | | Year FROM _____ TO _____ | |
| Class at Graduation _____ | | Class at Graduation _____ | |
| VICTORIA PRE-U | | VICTORIA JUNIOR COLLEGE | |
| Year FROM _____ TO _____ | | Year FROM _____ TO _____ | |
| Class at Graduation _____ | | Class at Graduation _____ | |
| SECTION D: PAYMENT (for NEW applicants only) | | | |
| Please enclose cheque for the sum of S\$100 in favour of "Old Victorians' Association" being payment for an OVA Life Membership. Please cross your cheque. Do not send cash in the mail. Allow 4-6 weeks for processing upon cheque clearance. | | | |
| Signature | | Date | |
| SECTION E: STRENGTHENING THE ALUMNI | | | |
| To strengthen the Victoria alumni network, please provide the contacts of TWO Victorians who are not connected with the OVA yet. Thank you for your support. | | | |
| Name of FIRST Victorian: | Dr / Mr / Mdm / Miss | Relationship to you: | |
| Telephone: | HP: | E-mail: | |
| Name of SECOND Victorian: | Dr / Mr / Mdm / Miss | Relationship to you: | |
| Telephone: | HP: | E-mail: | |
| FOR OFFICIAL USE ONLY | | | |
| DATE RECEIVED | CHEQUE (BANK & NUMBER) | RECEIPT NUMBER | |
| VERIFIED & UPDATED WITH RECORDS | ADDED TO CORRESPONDENCE | PROCESSED BY | |

OVA Membership Form v0.1.doc

c/o Victoria School. 2 Siglap Link, Singapore 448880. Tel/Fax: (65) 6245 3900 E-mail: info@ova.org.sg Website: www.ova.org.sg

1876, Kampong Glam Malay Branch School > 1901, Victoria Bridge School > 1933, Victoria School > 1942, Jalan Besar Boys' School > 1984, Victoria Junior College

Please send us your request with this business reply folder.

1. Fold along the dotted lines.
 2. Fold and insert this form, crossed cheque and passport photo into this business reply folder.
 3. Seal along the edges of this business reply folder with clear tape (do not staple).
 4. Affix postage.
 5. Drop your sealed business reply folder into the nearest post box.
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and we shall not forget...

Affix postage

Old Victorians' Association
c/o Victoria School
2 Siglap Link
Singapore 448880

Attention: Membership Processing